



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Mohamed Attawia, Hassan Serhan, Thomas M. DiMauro, Melissa Grace and David Urbahns

Application No.: 10/714,594                      Group: 1649

Filed: November 14, 2003                      Examiner: Standley, Steven H.

Confirmation No.: 3230

For: Autologous Treatment of Degenerated Disc with Cells

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
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Typed or printed name of person signing certificate	

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P.O. Box 1450  
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Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

					SMALL ENTITY		OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	22	MINUS	* 31	0	X \$ 25	\$	X 50	\$
INDEP	3	MINUS	** 3	0	X \$105	\$	X \$210	\$
					+ \$185	\$	+ \$370	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM								
					TOTAL = \$ 0		TOTAL = \$ 0	

\* not fewer than 20  
 \*\* not fewer than 3

The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to [ ] Sheets
			Rate	Total Amount Owed	Rate	Total Amount Owed	
			X \$130	\$[ ]	X \$260	\$[ ]	

### Petition for Extension of Time

- ☐ Applicant hereby petitions to extend the time to respond to the [ ] dated [ ] for [ ] month(s) from [ ] to [ ]. The appropriate fee is set forth below.
- ☐ [For action-specific language in an extension of time, select the appropriate option from the Firm Templates]

<input type="checkbox"/>	Petition for [    ] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
	<b>TOTAL:</b>	\$ _____

<input type="checkbox"/>	Petition for [    ] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input checked="" type="checkbox"/>	Other Fees:	_____
	Request for Continued Examination Fee	\$ 810.00
		\$ _____
	<b>TOTAL:</b>	<b>\$ 810.00</b>

Dated: October 31, 2017